

REPORTS INVENTORY						CONTROL NO. <i>DDS/OC-004</i>	
PREPARE IN DUPLICATE							
1. TITLE OF REPORT (if a fill-in report include Form No.) <b>Report of Significant OC Accomplishments</b>						2. TYPE OF REPORT <input checked="" type="checkbox"/> STATISTICAL <input checked="" type="checkbox"/> NARRATIVE <input type="checkbox"/> MACHINE-NAME LISTING	
3. FUNCTIONAL AREA		PERSONNEL		TRAINING		1 ADMIN. GENERAL	
		LOGISTICS		SECURITY		OTHER (specify)	
		MEDICAL		FINANCE		2 <b>COMMUNICATIONS</b>	
4. NO. OF COPIES PREPARED <b>20</b>		5. FREQUENCY (weekly, monthly, quarterly, etc.) <b>Annual</b>				6. DISTRIBUTION (No. of components not number of copies) <b>16</b>	
7. FORMAT (memorandum, form computer print-out, etc.) <b>Memorandum</b>		8. ADP PROCESSING <input checked="" type="checkbox"/> YES IF YES GIVE ADP PROCESSING NO. <input checked="" type="checkbox"/> NO				9. DIRECTIVE AUTHORITY REQUIRING REPORT <b>DD/S request.</b>	
10. PREPARING COMPONENT (include lowest level contributing information to report) <b>OC-P</b>				11. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.) <b>Fifteen feeder reports from various OC components - same title and format. (See feeders for details.)</b>			
12. COST FACTORS							
A. MANUAL PREPARATION AND REVIEW COSTS							
GRADE	HOURLY RATE	X	HOURS PER REPORT	=	COST PER REPORT	X	TIMES PREPARED = COST PER YEAR
GS-18	17.07		2	=	34.14		34.14
GS-16-6	14.89		2	=	29.78		29.78
GS-15-7	13.20		60	=	792.00		792.00
GS-07-8	4.80		20	=	96.00		96.00
						<b>TOTAL: 951.92</b>	
B. COSTS OF COMPUTER PRODUCED REPORTS							
Not applicable.							
TOTAL COSTS PER YEAR							
13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (in addition to directive or authority cited in Item 9). IF KNOWN, INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT. <b>Requested by higher authority. (DD/S requests this report from all DD/S components.)</b>							
14. FUTURE GOALS							
GOAL PROPOSED BY COMPONENT FOR THIS REPORT <input type="checkbox"/> RETAIN AS IS <input checked="" type="checkbox"/> OTHER (explain) <b>Refer to DD/S for future disposition of this report.</b>						ESTIMATED SAVINGS MAN-HOURS DOLLARS STAT	
16. DATE OF INVENTORY <b>7 October 1970</b>		17. NAME AND TITLE OF PERSON FURNISHING INFORMATION <b>Deputy Chief, Program Coordination Staff, OC</b>					18. EXTENSION